

ALTAR SERVER'S SIGN UP SHEET

NAME _____

ADDRESS _____

PHONE(S) _____

E-MAIL _____

MOM'S NAME _____

DAD'S NAME _____

WHICH MASS DO YOU ATTEND? _____

DO YOU HAVE ANY ALLERGIES? _____

MEDICAL CONDITIONS? _____

ARE YOU SENSITIVE TO INCENSE? _____

**YOU MUST ARRIVE 15 MINUTES BEFORE THE MASS
AT WHICH YOU WILL BE SERVING.**

Additional Notes: _____

ADDITIONAL EMERGENCY CONTACT: _____

I hereby give my permission to my Son/Daughter to volunteer as an altar server.

(Parent's Signature)

(Date)